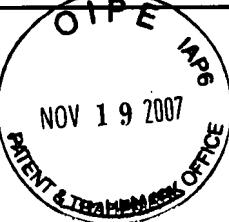


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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) 3917
	In re Application of Michael John Shea	
	Application Number 10/658,679	Filed 09/09/2003
	For Method, Apparatus and Program Storage Device for Verifying Existence of a Redundant Fibre Channel Path	
	Group Art Unit 2616	Examiner Melvin C. Marcelo

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows  
(check time period desired):

- |   |             |
|---|-------------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))  | \$ _____    |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))   | \$ _____    |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))  | \$ 1,050.00 |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))  | \$ _____    |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  | \$ _____    |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.       |             |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.  |             |
| <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.  |             |
| <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.  |             |
| <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 500-246 _____. |             |
- I have enclosed a duplicate copy of this sheet.

I am the  applicant/inventor

11/24/2007 AMMAD1 00000000 10658619

100.00 UP

- assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- attorney or agent of record.
- attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

Nov. 15, 2007

Date



Signature

Daniel A. Tysver

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

<input type="checkbox"/> Total of _____ forms are submitted.
--

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.